

City of Cincinnati & Hamilton County Departments of Community Development

American Dream Downpayment Initiative Application Form

Complete all entries that are applicable. Failure to supply all necessary information will delay processing of your application. All responses are confidential.

<i>Applicant:</i>			
Last Name/First Name/Middle Initial	Date of Birth / /	Marital Status (circle) Single Married Divorced Separated	
Address	City/State/Zip	Phone #	Social Sec. #

<i>Spouse/Co-Applicant</i>			
Last Name/First Name/M.I.	Date of Birth / /	Marital Status (circle) Single Married Divorced Separated	
Address	City/State/Zip	Phone #	Social Sec. #

Race/Ethnicity-Complete the following for the head of household. Circle appropriate response.

Single Race:				
Alaskan Native or American Indian	Asian	Black or African American	Native Hawaiian or Pacific Islander	White
Multi-Race:				
Alaskan Native or American Indian and White	Asian and White	Black or African American and White		
Alaskan Native or American Indian and Black or African American		Other Multi-Racial Group		
Ethnicity (to be completed by all applicants):				
Hispanic		Non-Hispanic		

Other Household Members-List requested information for all other members of household. If additional space is required, attach separate sheet.

Last Name, First Name, M.I.	Relationship to Applicant(s)	Date of Birth	Social Security #
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	

Household Income- List total number of members in household and gross family income (total income for **all** family members before taxes).

Number of Persons in Household	Gross Family Income	# of Persons in Household Earning Income

Employment-List requested information for all adult members of household (18 and over) who are employed. If an individual has more than one employer, list each separately. If additional space is required, attach separate sheet.

Family Member Name	Employer Name & Full Address	Telephone #	Position Held	Gross Earnings (circle appropriate interval)
		()		\$ wkly/bi-wkly/mnthly/yrly
		()		\$ wkly/bi-wkly/mnthly/yrly
		()		\$ wkly/bi-wkly/mnthly/yrly
		()		\$ wkly/bi-wkly/mnthly/yrly

Savings & Investments-List requested information for checking, savings, certificates of deposit, mutual funds, stocks, etc. for adult members of household. If additional space is required, attach separate sheet. Do not list retirement accounts such as IRA's, 401K, etc.

Acct. in Name Of:	Name, Address & Phone # of Financial Institution	Type of Instrument (checking, savings, C.D., stock, etc.)	Account #	Balance/Value

I verify that all information provided on this application and the attached Income Worksheet is true and correct. I realize that I may be held civilly and criminally responsible under federal and state law for knowingly providing any false or fraudulent information.

Applicant Signature_____

Date_____

Spouse/Co-Applicant Signature_____

Date_____

(over)

ANNUAL INCOME	Person 1	Person 2	Person 3	Person 4	Subtotal
1. Wages, Salaries, Tips, etc.					
2. Business Income					
3. Interest & Dividend Income					
4. Retirement & Insurance Income					
5. Unemployment & Disability Income					
6. Welfare Assistance					
7. Alimony, Child Support, & Gift Income					
8. Armed Forces Income					
9. Other Income					
Total					

INSTRUCTIONS FOR COMPLETING INCOME WORKSHEET

The income worksheet above must be completed for all adult members (18 or Older) of the household who have the types of income listed. Space has been provided on the form for up to 4 family members. If additional space is required, please photocopy the form. All entries should reflect annual amounts. For example, if your present salary is \$2,000 per month, line 1 would be \$24,000 (\$2,000 x 12).

Line 1 Income should include the full amount, before payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services. If you anticipate a raise within the next 12 months, please include that in calculating your income. For example, if your present wage is \$10 per hour and in 6 months you anticipate a .50 increase, calculate it as follows: \$10 x 40(hours) = \$400 x 26 (weeks) = \$10,400; \$10.50 per hour x 40(hours) = \$420 x 26 (weeks) = \$10,920; \$10,400 + \$10,920 = \$21,320 Annual Income

Line 2 Income should include net income from the operation of a business or profession.

Line 3 Income should include interest, dividends and other net income of any kind from real or personal property.

If the total cash value of all assets is \$5,000 or more, the annual income generated from the asset must be calculated. For example, if one has a 6 month average checking balance of \$6,000 in an interest bearing account using the current Passbook Rate of 2 %, the income generated from the checking account would be \$120 or (\$6,000x.02 = \$120).

Line 4 Income should include the full amount of periodic payments received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other types of periodic receipts.

Line 5 Income should include payments in lieu of earnings, such as unemployment and disability compensation, workers comp and severance pay.

Line 6 Income should include payments from welfare assistance.

Line 7 Income should include periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling.

Line 8 Income should include all regular pay, special day and allowances of a member of the Armed Forces.

You must provide at least 2 pieces of supporting documentation for each entry on the income worksheet.

However for checking account information statements must be provided for the past 6 months.

Generally, these would be copies of the two most recent statements or summaries for the given item.

Some examples of supporting documentation are copies of the following:

- check stubs that support figures provided for wages, salary, unemployment compensation, retirement, disability, etc.
- bank statements indicating interest earned on savings and checking, etc.
- quarterly or monthly statements indicating dividends earned from stocks, mutual funds, etc.

Failure to supply adequate documentation will result in the return of your application. Mail completed application and verifications to the appropriate address below.

For home purchase in City of Cincinnati:

Attention ADDI Program

City of Cincinnati Dept. of Community Development & Planning

805 Central Avenue, Suite 700; Cincinnati, OH 45202